

June 25, 2003

Mr. Mike Lewis, Commissioner
Alabama Medicaid Agency
501 Dexter Avenue
P.O. Box 5624
Montgomery, Alabama 36103-5624

Dear Mr. Lewis:

I am pleased to inform you that your request to renew Alabama's Home and Community-Based Waiver for Elderly and Disabled Individuals, has been approved. The effective period for this waiver program (control number **0068.91.R3**), is October 1, 2002 through September 30, 2007.

Specifically, you requested to provide case management, personal care, adult day health, companion, respite, and homemaker services for individuals who require the level of care provided in a nursing facility.

Based on the review of the January 10, 2003, renewal application and clarification provided in the May 27, 2003 response to our request for additional information, we have concluded that the request fully conforms to statutory and regulatory requirements. The following estimates of unduplicated recipients and the average per capita cost of waiver services have been approved:

	<u>Unduplicated Recipients</u>	<u>Factor D</u>	<u>Total Expenditures</u>
Year 1: (10/1/02-9/30/03)	7500	\$7,618	\$57,136,437
Year 2: (10/1/03-9/30/04)	7500	\$7,983	\$59,870,032
Year 3: (10/1/04-9/30/05)	7500	\$8,402	\$63,014,430
Year 4: (10/1/05-9/30/06)	7500	\$8,769	\$65,766,923
Year 5: (10/1/06-9/30/07)	7500	\$9,190	\$68,927,656

We appreciate the effort and cooperation provided by your staff during our review of this request. If there are any questions, you may contact Terrie Morris at (404) 562-7414.

Sincerely,

Rhonda R. Cottrell
Associate Regional Administrator
Division of Medicaid and Children's Health